

APPLICATION DATA SHEET**Application Information**

Application number::
Filing Date::
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?::
Computer Readable Form (CRF)?:: No
Number of copies of CRF::
Title :: 3-NITROGEN-6,7-DIOXYGEN STEROIDS AND
USES RELATED THERETO
Attorney Docket Number:: 480117.407C1
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 8
Small Entity?:: No
Petition included?:: No
Petition Type::
Licensed U.S. Gov't Agency::
Contract or Grant No::
Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Jeffery
Middle Name:: R
Family Name:: Raymond
Name Suffix::
City of Residence:: Vancouver
State or Province of Residence:: BC
Country of Residence:: Canada
Street of mailing address:: #19 – 2658 Morningstar Cr.
City of mailing address:: Vancouver
State or Province of mailing address:: BC
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: V5S 4P4

Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full Capacity
Given Name::	Claudia
Middle Name::	E
Family Name::	Kasserra
Name Suffix::	
City of Residence::	North Vancouver
State or Province of Residence::	BC
Country of Residence::	Canada
Street of mailing address::	1165 Deep Cove Road
City of mailing address::	North Vancouver
State or Province of mailing address::	BC
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	V7G 1S4

Third Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Yaping
Middle Name::
Family Name:: Shen
Name Suffix::
City of Residence:: Port Coquitlam
State or Province of Residence:: BC
Country of Residence:: Canada
Street of mailing address:: 2688 Fortress Drive
City of mailing address:: Port Coquitlam
State or Province of mailing address:: BC
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: V3C 6E3

Correspondence Information

Correspondence Customer Number :: **00500**

Representative Information

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Continuation of	09/845,775	04/30/01
09/845,775	Non-Provisional claiming the benefit under 35 USC 119(e) of	60/200,617	04/28/00

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	Inflazyme Pharmaceuticals Ltd.
Street of mailing address::	5600 Parkwood Way, Suite 425
City of mailing address::	Richmond
State or Province of mailing address::	BC
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	V6V 2M2